Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF HAWAII	=	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your	full name		
	your pictu exam	e the name that is on government-issued re identification (for nple, your driver's se or passport).	Rose First name C.C. Middle name	First name Middle name
	ident	your picture ification to your ing with the trustee.	Cabalo Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		ther names you have I in the last 8 years		
		de your married or en names.		
3.	your num Indiv	the last 4 digits of Social Security ber or federal ridual Taxpayer tification number)	xxx-xx-6864	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	1438 Kemoa Place	If Debtor 2 lives at a different address:
		Wailuku, HI 96793 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Maui	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		P.O. Box 1167 Puunene, HI 96784	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Rose C.C. Cabalo		lo		Case number (if known)				
Par	t 2:	Tell the Court About	our Bank	ruptcy Cas	se .			
7.	Ban	chapter of the cruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	cno	sing to file under	■ Chap	ter 7				
			☐ Chapt	ter 11				
			☐ Chapt	ter 12				
			☐ Chapt	ter 13				
8.	How	you will pay the fee	abo	out how you	u may pay. Typically, if you are attorney is submitting your payr	paying the fee	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money shalf, your attorney may pay with a credit card or check with	
					the fee in installments. If you in Installments (Official Form		tion, sign and attach the Application for Individuals to Pay	
			□ I re	quest that	my fee be waived (You may i	equest this opti	ion only if you are filing for Chapter 7. By law, a judge may,	
			app	olies to you	r family size and you are unabl	e to pay the fee	your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out	
			the	Application	n to Have the Chapter 7 Filing I	Fee Waived (Of	ficial Form 103B) and file it with your petition.	
9. Ha		Have you filed for	■ No.					
		bankruptcy within the last 8 years?	☐ Yes.					
		•		District	,	When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy	■ No					
		s pending or being by a spouse who is	☐ Yes.					
	not f you,	iling this case with or by a business ner, or by an						
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor		A.()	Relationship to you	
				District		When	Case number, if known	
11.	Do y	ou rent your	□ No.	Go to lir	ne 12.			
	resid	lence?	Yes.	Has you	ır landlord obtained an eviction	judgment agair	nst you?	
			_ 103.	_	No. Go to line 12.			

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Deb	otor 1 Rose C.C. Cabalo	ı		Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Propri	ietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of b	usiness
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if an	у
	If you have more than one sole proprietorship, use a		Number, Street, City, St	tate & ZIP Code
	separate sheet and attach it to this petition.		Check the appropriate I	box to describe your business:
			☐ Health Care Bus	siness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Re	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Bro	ker (as defined in 11 U.S.C. § 101(6))
			☐ None of the about	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indicate that you arns, cash-flow statement, and S.C. 1116(1)(B).	e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of dederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Ch	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and identifiable hazard to public health or safety?		What is the hazard?	
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapa	

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	Rose C.C. Cabalo			Case numi	Der (if known)			
Pari	6: Answer These Quest	ons for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or busing	ess debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		. Do you estimate that after any exempt pro available to distribute to unsecured creditor	operty is excluded and administrative expenses s?			
	administrative expenses		■ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		☐ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		5001-10,000	☐ 50,001-100,000			
		□ 100-199 □ 200-999		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	= \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$5	•	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		01 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
		_ ' '	001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Part	7: Sign Below							
For	you	I have exa	amined this petition, and I de	eclare under penalty of perjury that the info	rmation provided is true and correct.			
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request	relief in accordance with the	e chapter of title 11, United States Code, sp	pecified in this petition.			
		bankrupto and 3571	cy case can result in fines up	nt, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	r or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Rose C.	C.C. Cabalo C. Cabalo of Debtor 1	Signature of Deb	tor 2			
		Executed		Executed on				
			MM / DD / YYYY		M / DD / YYYY			

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jean Christensen	Date	March 16, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Jean Christensen		
Printed name		
The Law Office of Jean Christensen LLLC		
Firm name		
1253 S. Beretania St. Ste. 1704		
Honolulu, HI 96814		
Number, Street, City, State & ZIP Code		
Contact phone (808) 521-1202	Email address	jchristensenlaw@gmail.com
8475 HI		
Bar number & State		

E	in this information to identi	ifu your cook			
	in this information to idention to Table 1. Rose C.C.				
	First Name	Middle Name	Last Name		
	otor 2 ouse if, filing) First Name	Middle Name	Last Name		
Uni	ted States Bankruptcy Court f	or the: DISTRICT OF HAWA	.11		
Cas	se number				
(if kn	nown)			_	ck if this is an nded filing
	ficial Form 106Su				
			and Certain Statistical Information ble are filing together, both are equally responsible for	or supply	12/15
info	rmation. Fill out all of your s	schedules first; then complete	the information on this form. If you are filing amend		
		•	eck the box at the top of this page.		
Par	t 1: Summarize Your Ass	ets			
					assets of what you own
1.	Schedule A/B: Property (C	Official Form 106A/B)			
				\$	0.00
	1b. Copy line 62, Total person	onal property, from Schedule A/	B	\$	31,100.00
	1c. Copy line 63, Total of all	property on Schedule A/B		\$	31,100.00
Par	t 2: Summarize Your Liab	pilities			
					liabilities nt you owe
2.		Have Claims Secured by Prope in Column A, Amount of claim,	rty (Official Form 106D) at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	3,098.00
3.		no Have Unsecured Claims (Offic om Part 1 (priority unsecured cla	cial Form 106E/F) nims) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from	om Part 2 (nonpriority unsecured	d claims) from line 6j of Schedule E/F	\$	153,007.58
			Your total liabilities	\$	156,105.58
Par	t 3: Summarize Your Inco	ome and Expenses			
4.	Schedule I: Your Income (O Copy your combined month)		ule I	\$	3,575.33
5.	Schedule J: Your Expenses Copy your monthly expense	c (Official Form 106J) es from line 22c of <i>Schedule J</i>		\$	3,527.00
Par	t 4: Answer These Questi	ions for Administrative and St	atistical Records		
6.		tcy under Chapters 7, 11, or 15 to report on this part of the form.	3? Check this box and submit this form to the court with yo	ur other s	chedules.
7.	■ Yes What kind of debt do you	have?			
	■ Your debts are prima	rily consumer debts. Consume	er debts are those "incurred by an individual primarily for	a persona	al. family, or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,935.00

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clai	m
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	2,600.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,600.00

Fill in this in	nformation to ider	atify your case	and this filing:				
			and this ming.				
Debtor 1	Rose C.C	C. Cabalo	Middle Name	Last Name			
Debtor 2							
(Spouse, if filing)	First Name		Middle Name	Last Name			
United States	s Bankruptcy Cour	t for the: DIST	RICT OF HAWAII				
Case numbe	er						Check if this is an
Cube Humbe							amended filing
Official	Form 106 <i>A</i>	A/B					
			• • • • • • • • • • • • • • • • • • • •				4044
	ule A/B:				P. (d)		12/15
think it fits bes	st. Be as complete a more space is need	and accurate as	oossible. If two married	ce. If an asset fits in more than o people are filing together, both a On the top of any additional pag	are equally responsible fo	r supply	ing correct
Part 1: Desc	ribe Each Residenc	e, Building, Land	I, or Other Real Estate Y	ou Own or Have an Interest In			
1. Do vou owr	າ or have anv legal ເ	or equitable inter	est in any residence, hu	ilding, land, or similar property?			
_	, ,		,				
■ No. Go to							
☐ Yes. Wh	ere is the property?						
Part 2: Desc	ribe Your Vehicles						
	·	•	ehicles, motorcycles	G: Executory Contracts and L	техрией Leases.		
3.1 Make:	Honda		Who has an interes	t in the property? Check one	Do not deduct secure	d claims	or exemptions. Put
Model:	Chale		Debtor 1 only	t in the property? Check one	the amount of any sec Creditors Who Have		
Year:	2001		☐ Debtor 2 only		Current value of the		urrent value of the
Approx	ximate mileage:	163,000	Debtor 1 and Deb	otor 2 only	entire property?		ortion you own?
Other i	information:		At least one of the	e debtors and another			
			Check if this is o	community property	\$1,500.0	<u> </u>	\$1,500.00
Examples: No Yes Add the conpages your pages your 3: Description	Boats, trailers, mo	tors, personal v e portion you o for Part 2. Write and Household	vatercraft, fishing vesse wn for all of your enti e that number here	I vehicles, other vehicles, and els, snowmobiles, motorcycle a ries from Part 2, including an following items?	nccessories	port	\$1,500.00 ent value of the ion you own? ot deduct secured
	d goods and furn		s, china, kitchenware			clain	ns or exemptions.

□ No

Debtor 1	Rose C.C. C	abalo	Case number (if known)	
■ Yes.	Describe			
		Household furnishings		\$300.00
□No	les: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, prin phones, cameras, media players, games	nters, scanners; music c	ollections; electronic devices
		TV (300) and laptop (300)		\$600.00
Examp		figurines; paintings, prints, or other artwork; books, pictures, or other ons, memorabilia, collectibles	art objects; stamp, coin	, or baseball card collections;
	nent for sports a les: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, g	golf clubs, skis; canoes	and kayaks; carpentry tools;
	Describe			
■ No	ples: Pistols, rifle	s, shotguns, ammunition, and related equipment		
<i>Exam</i> _l □ No	<i>ples:</i> Everyday cl	othes, furs, leather coats, designer wear, shoes, accessories		
■ Yes.	Describe			
		Clothes and shoes		\$300.00
□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom je Four rings	welry, watches, gems, ç	gold, silver \$500.00
Example No □ Yes.	arm animals ples: Dogs, cats, Describe	birds, horses d household items you did not already list, including any health a	aids you did not list	
■ No □ Yes.	Give specific in	formation		
		of all of your entries from Part 3, including any entries for pages number here	you have attached	\$1,700.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured

Debtor 1	Rose C.C. Cabalo	Case number (if known)	
		claims	or exemptions.
□ No	oples: Money you have in your wallet, in your	home, in a safe deposit box, and on hand when you file your petition	
— 163.			\$100.00
	sits of money oples: Checking, savings, or other financial acinstitutions. If you have multiple accoun	counts; certificates of deposit; shares in credit unions, brokerage houses, and its with the same institution, list each.	other similar
_		Institution name:	
	17.1.	Bank of Hawaii checking account	\$300.00
	17.2.	Maui County Credit Union savings account	\$600.00
	17.3.	D is on disabled brother's savings account at Bank of Hawaii so she can handle his bills and living expenses paid from his SSDI; \$0 of the funds on deposit belong to D; monthly benefit is approx. \$1,000	\$0.00
□ No ■ Yes.	Institution or issue	er name: SOP just opened last year	\$400.00
O Non n			
	venture	porated and unincorporated businesses, including an interest in an LLC,	partnersnip, and
☐ Yes.	. Give specific information about them Name of entity:		
Nego		gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
☐ Yes.	Give specific information about them Issuer name:		
Exam □ No -	,	, 403(b), thrift savings accounts, or other pension or profit-sharing plans	
■ Yes.	List each account separately. Type of account:	Institution name:	
		Two 401(k)s (10,000) and (15,000)	\$25,000.00
Your s Exam □ No	pples: Agreements with landlords, prepaid ren	so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications companies, or other	rs
Yes.		Institution name or individual:	

Yes	Debtor 1	Rose C.C. Cabalo	Case number (if known	n)
No			Security deposit with landlord	\$1,500.00
No	2 Annui	ties (A contract for a poriodic nayment o	of manay to you gither for life or for a number of years)	
Yes		nes (A contract for a periodic payment c	of moriey to you, ettiler for life of for a number of years)	
Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 20 U.S.C. §\$ 530(b)(1), 529A(b), and 529(b)(1). No Yes		Issuer name and descrip	otion.	
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Yes			to a marker of ADLE management and a marker of the control of the	
No				rogram.
Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: littlemed domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Oney or property owed to you? No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits, sick pay, vacation pay, workers' compensation, Social Security benefits, sick pay, vacation pay, workers' compensation, Social Security benefits, sick pay, vacation pay, workers' compensation, Social Security benefits, sick pay, vacation pay, workers' compensation, Social Security benefits, sick pay, vacation pay,	■ No			
No	☐ Yes.	Institution name and des	cription. Separately file the records of any interests.11 U.S.C. § 521(c):
No	. Trusts	a. equitable or future interests in prop	erty (other than anything listed in line 1), and rights or powers e	exercisable for your benefit
Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Oncy or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company name: Beneficiary: Surrender or refund value:	■ No	, - 	, (
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No	☐ Yes.	Give specific information about them		
No	7. Licens	ses, franchises, and other general into	angibles	
□ Yes. Give specific information about them Current value of the portion you own? Do not deduct secured claims or exemptions.				nses
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Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Term life insurance through employer \$0.00				
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□ No ■ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Term life insurance through employer \$0.00			health savings account (HSA): credit, homeowner's, or renter's insur	rance
Company name: Beneficiary: Surrender or refund value: Term life insurance through employer \$0.00	□ No	, , , ,	3	
Term life insurance through employer \$0.00	Yes.	Name the insurance company of each	policy and list its value.	
Term life insurance through employer \$0.00		Company name:	Beneficiary:	
				valu c .
		Term life insu	rance through employer	\$0.00
Disability insurance through employer \$0.00		Disahility insi	rance through employer	\$0.00

Deb	tor 1	Rose C.C. Cabalo		Case number (if known)	
	If you a someon	erest in property that is due you from someone who have the beneficiary of a living trust, expect proceeds from a line has died. Give specific information		are currently entitled to receiv	e property because
_		against third parties, whether or not you have filed a laves: Accidents, employment disputes, insurance claims, or r		and for payment	
	Yes.	Describe each claim			
	No	ontingent and unliquidated claims of every nature, includes	uding counterclaims	of the debtor and rights to s	et off claims
_	Any iina I No	ancial assets you did not already list			
	Yes.	Give specific information			
36.		ne dollar value of all of your entries from Part 4, includir rt 4. Write that number here	• •	ges you have attached	\$27,900.00
Part	5: Des	cribe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
-	No. Go	wn or have any legal or equitable interest in any business-relat to Part 6. o to line 38.	ed property?		
Part		cribe Any Farm- and Commercial Fishing-Related Property You u own or have an interest in farmland, list it in Part 1.	J Own or Have an Interes	st In.	
46. I		own or have any legal or equitable interest in any farm	or commercial fishir	ng-related property?	
	_	So to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
_	Examp	have other property of any kind you did not already list es: Season tickets, country club membership	?		
	■ No □ Yes. 0	Sive specific information			
54.	Add th	ne dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	Total real estate, line 2			\$0.00
56.		Total vehicles, line 5	\$1,500.00		
57.		Total personal and household items, line 15	\$1,700.00		
58.		Total financial assets, line 36	\$27,900.00		
59.		Total business-related property, line 45	\$0.00		
60.		Total farm- and fishing-related property, line 52	\$0.00		
61.	rart /	Total other property not listed, line 54	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$31,100.00	Copy personal property tota	\$31,100.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$31,100.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Rose C.C. Cabalo)		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF HAWAII		
Case number (if known)				☐ Check if this is an amended filing

Official Form 1060

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Prope	rty You Claim as Exempt
----------------------------	-------------------------

	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	from Check only one box for each exemption.			
	2001 Honda Civic 163,000 miles Line from Schedule A/B: 3.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(2)	
	Line non schedule A/B. 9.1		100% of fair market value, up to any applicable statutory limit			
	Household furnishings Line from Schedule A/B: 6.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)	
	Line Ironi Scriedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit		
	TV (300) and laptop (300) Line from Schedule A/B: 7.1	\$600.00		\$600.00	11 U.S.C. § 522(d)(3)	
	Line Holli Schedule PAB. 1.1			100% of fair market value, up to any applicable statutory limit		
	Clothes and shoes Line from Schedule A/B: 11.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)	
	Line Holli Schedule PAB. 11.1			100% of fair market value, up to any applicable statutory limit		
	Four rings Line from Schedule A/B: 12.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)	
	LINE HOLL SUITEURIE PAD. 12.1			100% of fair market value, up to any applicable statutory limit		

Current value of the portion you own		\$100.00 100% of fair market value, up to any applicable statutory limit \$600.00 100% of fair market value, up to any applicable statutory limit \$600.00 100% of fair market value, up to any applicable statutory limit \$600.00 100% of fair market value, up to any applicable statutory limit \$0.00	11 U.S.C. § 522(d)(5) 11 U.S.C. § 522(d)(5) 11 U.S.C. § 522(d)(5)
Schedule A/B \$100.00		\$100.00 100% of fair market value, up to any applicable statutory limit \$300.00 100% of fair market value, up to any applicable statutory limit \$600.00 100% of fair market value, up to any applicable statutory limit \$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5) 11 U.S.C. § 522(d)(5)
vings \$600.00 vings \$0.00 vings \$0.00 she of to D; ,000		100% of fair market value, up to any applicable statutory limit \$300.00 100% of fair market value, up to any applicable statutory limit \$600.00 100% of fair market value, up to any applicable statutory limit \$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5) 11 U.S.C. § 522(d)(5)
vings \$600.00 vings \$0.00 vings \$0.00 she of to D; ,000		100% of fair market value, up to any applicable statutory limit \$300.00 100% of fair market value, up to any applicable statutory limit \$600.00 100% of fair market value, up to any applicable statutory limit \$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
vings \$600.00 vings \$0.00 she g; \$0 of to D; ,000		100% of fair market value, up to any applicable statutory limit \$600.00 100% of fair market value, up to any applicable statutory limit \$0.00 100% of fair market value, up to	11 U.S.C. § 522(d)(5)
vings \$0.00 she g; \$0 of to D; ,000		\$600.00 100% of fair market value, up to any applicable statutory limit \$0.00 100% of fair market value, up to any applicable statutory limit	
vings \$0.00 she g; \$0 of to D; ,000		100% of fair market value, up to any applicable statutory limit \$0.00 100% of fair market value, up to	
she #0.50 ; \$0 of to D; ,000		\$0.00 \$100% of fair market value, up to	11 U.S.C. § 522(d)(5)
she #0.50 ; \$0 of to D; ,000		100% of fair market value, up to	11 U.S.C. § 522(d)(5)
g; \$0 of to D; ,000			
ed last \$400.00			
		\$400.00	11 U.S.C. § 522(d)(5)
		100% of fair market value, up to any applicable statutory limit	
9000) \$25,000.00		\$25,000.00	11 U.S.C. § 522(d)(12)
		100% of fair market value, up to any applicable statutory limit	
d \$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(5)
		100% of fair market value, up to any applicable statutory limit	
\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
		100% of fair market value, up to any applicable statutory limit	
\$0.00		\$0.00	11 U.S.C. § 522(d)(10)(C)
		100% of fair market value, up to any applicable statutory limit	
	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$1,500.00	\$1,500.00 \$1,500.00 \$1,500.00 \$1,500.00 \$1,00% of fair market value, up to any applicable statutory limit \$0.00 \$0

Fill in this	information	າ to identify yoເ	r case:				
Debtor 1	Ro	ose C.C. Caba	lo			7	
	Firs	st Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filin	ıg) Firs	st Name	Middle Name	Last Name			
	•	tcy Court for the:					
		,					
Case numb	per					□ Chook	if this is an
(ii kilowii)							led filing
Official I	Form 10	6D					
			Who Have Cla	aims Secure	d by Property		12/15
<u> </u>	ule D.	Creditors	WITO HAVE CIE	airiis Secure	a by Froperty		12/13
			If two married people are fili out, number the entries, and				
number (if kr	•						
		claims secured by					
⊔ No.	Check this b	oox and submit t	nis form to the court with y	our other schedules. Y	ou have nothing else to r	eport on this form.	
Yes.	. Fill in all of	the information	below.				
Part 1:	List All Sec	ured Claims					
2. List all se	cured claims	s. If a creditor has i	more than one secured claim,	list the creditor separately	Column A	Column B	Column C
			a particular claim, list the oth cal order according to the cred		Do not deduct the	Value of collateral that supports this claim	Unsecured portion If any
2.1 Sout Final	hern Caso nce	cades	Describe the property that	t secures the claim:	\$3,098.00	\$1,500.00	\$1,598.00
Credito	r's Name		2001 Honda Accord				
		.					
150 l 124	N. Bartlett	St. Ste.	As of the date you file, the	claim is: Check all that			
	ford, OR 9	7501	apply.				
	•	tate & Zip Code	☐ Contingent ☐ Unliquidated				
Nambo	r, Olioot, Oity, O	tato d Zip oodo	Disputed				
Who owes	the debt? C	heck one.	Nature of lien. Check all the	nat apply.			
Debtor 1	only		■ An agreement you made	e (such as mortgage or se	cured		
Debtor 2	only		car loan)	, , ,			
_	and Debtor 2	only	☐ Statutory lien (such as ta	ax lien, mechanic's lien)			
☐ At least o	ne of the deb	tors and another	☐ Judgment lien from a lav				
	this claim re nity debt	lates to a	Other (including a right to	o offset)			
Date debt w	as incurred	9/2017	Last 4 digits of acc	ount number SD11			
Add the de	ollar value of	your entries in C	olumn A on this page. Write	that number here:	\$3,098.	.00	
			the dollar value totals from	all pages.	\$3,098.	.00	
write that	number here	; .			,		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in th	is information to identify	your case:			
Debtor 1	Rose C.C. Ca	ahalo			
DODIO! 1	First Name	Middle Nar	me Last Name		
Debtor 2					
(Spouse if,	filing) First Name	Middle Nar	me Last Name		
United S	States Bankruptcy Court for	the: DISTRICT O	F HAWAII		
0				_	
Case nu (if known)	mber				☐ Check if this is an
					amended filing
o	15 1005/5				
	I Form 106E/F				
Sched	dule E/F: Creditor	s Who Have	Unsecured Claims		12/15
left. Attac		nis page. If you have no	o information to report in a Part,		number the entries in the boxes on the p of any additional pages, write your
	ny creditors have priority uns				
_	o. Go to Part 2.		.,		
Part 2:	_	IORITY Unsecured (Claims		
	ny creditors have nonpriority				
_		-	orm to the court with your other sch	oodulos	
_		i tilis part. Subiliit tilis ic	of the court with your other sch	iedules.	
Y	es.				
unse	cured claim, list the creditor sep one creditor holds a particular of	parately for each claim. I		type of claim it is. Do not list cla	or has more than one nonpriority ims already included in Part 1. If more aims fill out the Continuation Page of
					Total claim
4.1	American Express	1	Last 4 digits of account number	8147	\$2,156.00
	Nonpriority Creditor's Name				
ı	P.O. Box 981537	,	When was the debt incurred?	Opened 9/2003 Last a 12/2015	active
_	El Paso, TX 79998		when was the debt incurred:	12/2013	
	Number Street City State Zlp C		As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Chec		_		
	Debtor 1 only		Contingent		
	Debtor 2 only		Unliquidated		
	Debtor 1 and Debtor 2 only	_	Disputed		
	At least one of the debtors a		Type of NONPRIORITY unsecure	ea ciaim:	
	☐ Check if this claim is for a debt	Community	☐ Student loans	aration agreement as divers - 45	at you did not
	uebt Is the claim subject to offset?		DObligations arising out of a sepreport as priority claims	aration agreement or divorce that	ai you dia not
	■ No		Debts to pension or profit-shari	ng plans, and other similar debts	3
!	□Yes		Other. Specify Credit card	d	

Debtor	1 Rose C.C. Cabalo	Case number (if know)				
4.2	AP Account Services, LLC	Last 4 digits of account number	\$0.00			
	Nonpriority Creditor's Name 9311 San Pedro Avenue, Suite 600	When was the debt incurred?				
	San Antonio, TX 78216 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Additional notice for Valley Isle Community FCU				
4.3	Bradford Richard Ing, Esq.	Last 4 digits of account number	\$0.00			
	Nonpriority Creditor's Name The Ing Law Firm 2145 Wells Street, Suite 204 Wailuku, HI 96793	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	,				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Additional notice for Maui Collection and Valley Isle Community FCU				
4.4	Chex Systems, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00			
	Attn: Consumer Relations 7805 Hudson Road, Suite 100 Saint Paul, MN 55125	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	\square Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	Other. Specify Notice only				

Debt	or 1 Rose C.C. Cabalo	Case number (if know)	
4.5	Credit Collection Service Nonpriority Creditor's Name	Last 4 digits of account number 4521	\$146.00
	P.O. Box 607	When was the debt incurred? Placed for collection 8/2012	
	Norwood, MA 02062 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>	Поли	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Progressive insurance	
4.6	Diversified Consultants, Inc.	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name P.O. Box 551268 Jacksonville, FL 32255-1268	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Additional notice for Verizon Wireless	
4.7	Ronpriority Creditor's Name	Last 4 digits of account number	\$2,600.00
	111 South Washington Ave. Ste 1400	When was the debt incurred?	
	Minneapolis, MN 55401 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify	
		JUUCHI IVAH	

Rose C.C. Cabalo	Case number (if know)	
Hawaiian Electric Company Nonpriority Creditor's Name	Last 4 digits of account number	\$261.69
P.O. Box 2750 Honolulu, HI 96840	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Utilities	
Maui Collection Service, Inc.	Last 4 digits of account number	\$145.89
Nonpriority Creditor's Name 1885 Main St. Ste. 106	When was the debt incurred?	
Wailuku, HI 96793 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Collection Valley Isle Community FCU overdraft from account closed around Nov. 2016	
Medcah, Inc.	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name 320 Uluniu St. Ste. 5	When was the debt incurred?	
Kailua, HI 96734 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Additional notice for Hawaiian Electric Co.	

Rose C.C. Cabalo		Case number (if know)	
Midwest Fidelity Service	Last 4 digits of account number	6600	\$600.0
Nonpriority Creditor's Name 103 S. Main St. Ottawa, KS 66067-2327	When was the debt incurred?	Placed for collection 5/2017	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection	EMG Acquisition Group	
Nationstar Mortgage LLC	Last 4 digits of account number	3799	\$127,836.00
Nonpriority Creditor's Name 8950 Cypress Waters Blvd	When was the debt incurred?	5/2008	
Dallas, TX 75063 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	• ,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	ex-boyfrier property at	ner on promissory note with nd for his sole Hawaiian Homes : 107 Opihi Place, Wailuku, HI hich D has never had a legal	
OneMain		2778	¢40.442.00
OneMain Nonpriority Creditor's Name	Last 4 digits of account number		\$10,143.0
P.O. Box 1010 Evansville, IN 47706	When was the debt incurred?	9/2015	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	

☐ Yes

■ Other. Specify Personal loan

Rose C.C. Cabalo		Case number (if know)	
Sears/CBNA Nonpriority Creditor's Name	Last 4 digits of account number	2611	\$2,867.00
P.O. Box 6282 Sioux Falls, SD 57117-6282	When was the debt incurred?	Opened 5/2008 Last active 5/2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify Credit card		
Valley Isle Community FCU	Last 4 digits of account number	8800	\$5,054.00
Nonpriority Creditor's Name 160 Paahana St. Kahului, HI 96732	When was the debt incurred?	7/2014	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed	L. L. L.	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Personal lo	oan co-signed for ex-boyfriend;	
Verizon Wireless Nonpriority Creditor's Name	Last 4 digits of account number	7500	\$1,198.00
P.O. Box 26055 Minneapolis, MN 55426	When was the debt incurred?	5/2014	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
		g p , and an and dobto	
Yes	Other. Specify Wireless		

Debto	or 1 Rose C.C. Cabalo			Case number (if know)	
4.1	William T. Kinaka, Esq.	Last 4 digits of acco	unt number	· · · · · · · · · · · · · · · · · · ·	\$0.00
	Nonpriority Creditor's Name 24 N. Church St. Ste. 201 Wailuku, HI 96793	When was the debt i	ncurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you fil	le, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORI	TY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising report as priority claim		aration agreement or divorce that you did not	
	■ No	☐ Debts to pension of	or profit-sharii	ng plans, and other similar debts	
	Yes	Other. Specify	Additional Service, In	notice for Maui Collection c.	
Part 3	3: List Others to Be Notified About a D	ebt That You Already Lis	sted		
is tr	ying to collect from you for a debt you owe to	someone else, list the origin hat you listed in Parts 1 or 2	al creditor in	you already listed in Parts 1 or 2. For example, if an Parts 1 or 2, then list the collection agency here. itional creditors here. If you do not have additional	Similarly, if you
Ame	and Address rican Express	On which entry in Part 1 or l Line 4.1 of (<i>Check one</i>):		list the original creditor? Part 1: Creditors with Priority Unsecured Claims	
_	Box 10396			Part 2: Creditors with Nonpriority Unsecured Claims	;
Des	Moines, IA 50306-0396	Last 4 digits of account num	nber		
	and Address crican Express	On which entry in Part 1 or I Line 4.1 of (<i>Check one</i>):		_	
	Box 360001	Line 4.1 of (Check one):		Part 1: Creditors with Priority Unsecured Claims	
_	Lauderdale, FL 33336-0001		•	Part 2: Creditors with Nonpriority Unsecured Claims	i
		Last 4 digits of account num	nber		
Name	and Address	On which entry in Part 1 or I	Part 2 did you	ı list the original creditor?	
	National Services, Inc.	Line 4.14 of (Check one):		Part 1: Creditors with Priority Unsecured Claims	
_	Box 469100 ondido, CA 92046-9100			Part 2: Creditors with Nonpriority Unsecured Claims	;
LSCC	Maido, CA 92040-9100	Last 4 digits of account num	nber		
Nome	and Address	On which entry in Part 1 or I	Dort 2 did voi	List the original graditor?	
	i Collection Service, Inc.	Line 4.9 of (<i>Check one</i>):	•	Part 1: Creditors with Priority Unsecured Claims	
	Box 14			Part 2: Creditors with Nonpriority Unsecured Claims	•
Wail	uku, HI 96793	Last 4 digits of account num		- Fait 2. Greators with Norphority Orisecured Glaims	1
Name	and Address	On which entry in Part 1 or I	Part 2 did you	ı list the original creditor?	
	i Electric Co.	Line 4.10 of (Check one):		Part 1: Creditors with Priority Unsecured Claims	
	Box 398			Part 2: Creditors with Nonpriority Unsecured Claims	;
rant	ului, HI 96733-6898	Last 4 digits of account num	nber		
Namo	and Address	On which entry in Part 1 or I	Part 2 did vo	List the original creditor?	
	cah, Inc.	Line 4.10 of (<i>Check one</i>):	-	Part 1: Creditors with Priority Unsecured Claims	
P.O.	Box 1187	(1.11.11)		Part 2: Creditors with Nonpriority Unsecured Claims	;
1/ 6:1-	LE UL 06724 4407				

P.O. Box 619094

Line 4.12 of (Check one):

Kailua, HI 96734-1187 Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address Mr. Cooper Dallas, TX 75261-9741

☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Official Form 106 E/F

Name and Address

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Rose C.C. Cabalo		Case number (if know)
Nationstar Mortgage Attn: Bankruptcy Notices P.O. Box 619094 Dallas, TX 75261-9741	_	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Danas, 17 13201-3141	Last 4 digits of account number	
Name and Address OneMain 333 Dairy Road, Suite 1018 Kahului, HI 96732-2413		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address OneMain Financial 6801 Colwell Blvd Irving, TX 75039	_	u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Progressive Insurance P.O. Box 894107 Los Angeles, CA 90189		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address The Progressive Corporation 6300 Wilson Mills Rd. Mayfield Village, OH 44143		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Verizon by American InfoSource LP as agent 4515 N Santa Fe Ave Oklahoma City, OK 73118		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim
6f.	Student loans	6f.	\$	2,600.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	150,407.58
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	153,007.58
	6b. 6c. 6d. 6e. 6f. 6g. 6h.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d.	6a. \$ 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

Fill in this infor	mation to identify your	case:		
Debtor 1	Rose C.C. Cabalo)		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF HAWAII		
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	y				
-	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

Fill in th	is information to identify your	case:			
Debtor 1	Rose C.C. Cabalo First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
United S	States Bankruptcy Court for the:	DISTRICT OF HAWAII			
Case nu (if known)	mber				☐ Check if this is an amended filing
	al Form 106H dule H: Your Cod	ebtors			12/15
people a fill it out, your nan	re filing together, both are equ and number the entries in the ne and case number (if known)	ally responsible for supp boxes on the left. Attach). Answer every question.	lying correct information the Additional Page to	on. If more space is this page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
1. D	o you have any codebtors? (If	you are filing a joint case, o	do not list either spouse a	is a codebtor.	
□ N ■ Y					
	/ithin the last 8 years, have you ona, California, Idaho, Louisiana				
	lo. Go to line 3. es. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in liı Forr	ne 2 again as a codebtor only i	if that person is a guarant	tor or cosigner. Make s	ure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1	Myron Keahi, Jr. 107 Opihi Place Wailuku, HI 96793			☐ Schedule D, I ■ Schedule E/F ☐ Schedule G _ Nationstar Mor	F, line 4.12
3.2	Myron Keahi, Jr. 107 Opihi Place Wailuku, HI 96793			☐ Schedule D, ☐ Schedule E/F☐ Schedule G _ Valley Isle Com	f, line 4.15

Fill	in this information	to identify your ca	ise:								
Del	otor 1	Rose C.C. Ca	abalo			_					
	otor 2 buse, if filing)					_					
Uni	ted States Bankrup	otcy Court for the:	DISTRICT OF HAWAI	I		_					
	se number						☐ A su	amende uppleme	nt showin	ng postpetition ollowing date:	
0	fficial Form	106 <u>l</u>					MM	/ DD/ Y	YYY		
S	chedule I:	Your Inco	ome								12/15
sup spo atta	plying correct info use. If you are se ch a separate she	ormation. If you parated and you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your s th you, do not inclu	spouse i de inforr	is livir matio	ng with yo n about yo	ou, inclu our spo	ide inforr use. If m	mation about ore space is	your needed,
1.	Fill in your emp	loyment									
	information.			Debtor 1						iling spouse	
	If you have more attach a separate		Employment status*	■ Employed				☐ Emplo -	•		
	information abou			☐ Not employed			L	☐ Not er	nployed		
	employers.		Occupation	Admin Assistan	nt						
	Include part-time self-employed wo		Employer's name	Kaanapali Beac	h Hotel						
	Occupation may or homemaker, if		Employer's address	2525 Kaanapali Lahaina, HI 967							
			How long employed th	nere? Four ye	ears						
				*See Atta	achment	t for A	dditional	Employ	ment Inf	ormation	
Par	t 2: Give De	etails About Mon	thly Income								
	mate monthly incuse unless you are		te you file this form. If y	ou have nothing to re	eport for	any lir	ne, write \$	0 in the	space. In	clude your no	n-filing
	ou or your non-filing e space, attach a s		re than one employer, co	mbine the information	n for all e	employ	ers for the	at persoi	n on the li	ines below. If	you need
						I	For Debto	or 1		btor 2 or ing spouse	
2.			y, and commissions (be alculate what the monthly		2.	\$_	4,93	34.82	\$	N/A	
3.	Estimate and lis	st monthly overti	me pay.		3.	+\$_		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$_	4,934	.82	\$	N/A	

				For I	Debtor 1		tor 2 or ng spouse
	Сору	r line 4 here	4.	\$	4,934.82	\$	N/A
5.	l ist a	all payroll deductions:					
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,205.53	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$	153.96	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	5h.+	\$	0.00	- \$	N/A
6.	Add t	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,359.49	\$	N/A
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,575.33	\$	N/A
8.	8b. 8c.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8a. 8b.	\$ \$	0.00	\$ \$	N/A N/A
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
	8e.	Social Security	8e.	\$	0.00	\$	N/A
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	_ 8f. 8g. _ 8h.+	\$ \$ \$	0.00 0.00 0.00	\$ \$. \$	N/A N/A N/A
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10.	Calcu	ulate monthly income. Add line 7 + line 9.	10. \$	3	3,575.33 + \$	N	/A = \$ 3,575.33
		he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			-		0,010.00
11.	State Include other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your of friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	depen			d in <i>Sche</i>	dule J. 11. +\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines				if it	12. \$ 3,575.33
13.	Do yo	ou expect an increase or decrease within the year after you file this form?	•				Combined monthly income
		No. Yes. Explain:					
		100. Explain.					

Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation	Part-time sales associate	
Name of Employer	The Home Depot	
How long employed	10 years	
Address of Employer	2455 Paces Ferry Road	
, ,	Atlanta, GA 30339	

Fill	in this information to identify your cas	e:						
Deb	otor 1 Rose C.C. Cabalo			Ch	eck if this is:			
	1000 0.0. 000010		☐ An amended filing					
	otor 2					wing postpetition chapter		
(Spo	ouse, if filing)			13 expenses as of	f the following date:			
Unit	ted States Bankruptcy Court for the: DIS	TRICT OF HAWAII		MM / DD / YYYY				
Cas	se number							
(If kı	(nown)							
Of	fficial Form 106J							
S	chedule J: Your Exp	enses				12/15		
info	as complete and accurate as poss ormation. If more space is needed, mber (if known). Answer every que	attach another sheet to this	e filing together, bo form. On the top of	oth are eq any addi	qually responsible f tional pages, write	or supplying correct your name and case		
Par								
1.	Is this a joint case?							
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a se	narata hausahald?						
	□ No	parate nousenoid?						
		Official Form 106J-2, Expenses	s for Separate House	hold of De	ebtor 2.			
2.	Do you have dependents? □ N	· n						
	Do not list Debtor 1 and Debtor 2.	Fill out this information for	Dependent's relation		Dependent's age	Does dependent live with you?		
	Do not ototo the					□ No		
	Do not state the dependents names.		Child		19	■ Yes		
					-	□ No		
						☐ Yes		
						□ No		
						Yes		
						□ No □ Yes		
3.	Do your expenses include	■ No				. La res		
	expenses of people other than	■ No □ Yes						
	yourself and your dependents?	103						
	tt 2: Estimate Your Ongoing Mo							
exp	timate your expenses as of your ba penses as of a date after the bankru plicable date.	nkruptcy filing date unless y iptcy is filed. If this is a supp	ou are using this fo plemental <i>Schedule</i>	orm as a s J, check	supplement in a Ch the box at the top o	apter 13 case to report of the form and fill in the		
Incl	lude expenses paid for with non-ca	sh government assistance i	f you know					
	value of such assistance and have ficial Form 106l.)	included it on Schedule I: \	our Income		Your exp	penses		
(011	neiai i omi rooi.			_				
4.	The rental or home ownership expayments and any rent for the grou		nclude first mortgage	4.	\$	1,500.00		
	If not included in line 4:							
	4a. Real estate taxes			4a.	\$	0.00		
	4b. Property, homeowner's, or re	nter's insurance		4b.	·	0.00		
	4c. Home maintenance, repair, a			4c.	\$	0.00		
_	4d. Homeowner's association or			4d.	· ·	0.00		
5.	Additional mortgage payments for	or your residence, such as ho	me equity loans	5.	\$	0.00		

Official Form 106J

Fill in this inform	nation to identify your	case:		
Debtor 1	Rose C.C. Cabalo			
Dahtar 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF HAWAII		
Case number (if known)				☐ Check if this is an amended filing
Official Form	-	ın Individual D	ebtor's Sche	edules 12/15
				12.10
If two married peo	ople are filing together	r, both are equally responsib	le for supplying correct in	information.
obtaining money		n connection with a bankrup		king a false statement, concealing property, or es up to \$250,000, or imprisonment for up to 20
Sign	Below			
Did you pay	or agree to pay some	one who is NOT an attorney	to help you fill out bankru	ruptcy forms?
■ No				
☐ Yes. N	ame of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the summar	y and schedules filed with	th this declaration and
X /s/ Rose	e C.C. Cabalo		X	
	.C. Cabalo e of Debtor 1		Signature of Debto	tor 2
Date N	larch 16, 2018		Date	
_	•			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in	thic inform	nation to identify you	ur caso:							
Debtor	7 1	Rose C.C. Caba	Middle Name	Last Name						
Debtor (Spouse		First Name	Middle Name	Last Name						
United	States Bar	nkruptcy Court for the:	DISTRICT OF HAWAII							
Case r	number									
(if known						Check if this is an				
						mended filing				
Offic	rial Fo	rm 107								
		-	Affairs for Individ	duals Filing for E	Bankruptcy	4/16				
informa	ation. If m		, attach a separate sheet to		equally responsible for sup y additional pages, write you					
Part 1			arital Status and Where You	Lived Refore						
				Lived Beloit						
	Vhat is your current marital status?									
	Married Not mar	ried								
2. Dı	Ouring the last 3 years, have you lived anywhere other than where you live now?									
	_									
		t all of the places you	lived in the last 3 years. Do no	ot include where you live now	V.					
D	ebtor 1 Pri	ior Address:	Dates Debtor 1	Debtor 2 Prior Ad	ddress:	Dates Debtor 2				
1	07 Onihi	Place	lived there From-To:	П		lived there				
	07 Opihi ∣ Vailuku, H		Approx. 10 ye ending 2016	☐ Same as Debtor ars	1	☐ Same as Debtor 1 From-To:				
Part 2 4. Di	No Yes. Ma Explain d you have	ke sure you fill out Son the Sources of You any income from er I amount of income you	alifornia, Idaho, Louisiana, New hedule H: Your Codebtors (Of ur Income	vada, New Mexico, Puerto R ficial Form 106H). g a business during this y ll businesses, including part		Visconsin.)				
	□ No									
	Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
For last calendar year: (January 1 to December 31, 2017)			■ Wages, commissions, bonuses, tips	\$11,997.05	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Official Form 107

Debtor 1 Rose C.C. Cabalo				abalo		Case number (if known)				
					Debtor 1		Debtor 2			
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)	
					■ Wages, commissions, bonuses, tips	\$59,217.75	☐ Wages, comr bonuses, tips	nissions,		
					☐ Operating a business		☐ Operating a b	ousiness		
			dar year be December		■ Wages, commissions, bonuses, tips	\$51,896.00	☐ Wages, comr bonuses, tips	nissions,		
					☐ Operating a business		☐ Operating a b	ousiness		
	winn	nings. I each s No	f you are fil	ing a joint ca	pensions; rental income; inter se and you have income that young from each source separate	ou received together, list it o	only once under De	btor 1.	d gambling and lottery	
					Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of inco	ome	Gross income	
					Describe below.	each source (before deductions and exclusions)	Describe below.		(before deductions and exclusions)	
Pa	rt 3:	List	Certain Pa	yments You	Made Before You Filed for I	Bankruptcy				
6.	Are	either No.	Neither Deindividual	ebtor 1 nor I primarily for a	e's debts primarily consumer Debtor 2 has primarily consu a personal, family, or househol	mer debts. Consumer debt d purpose."			1(8) as "incurred by an	
			□ No.	Go to line 7						
			☐ Yes	paid that ci	each creditor to whom you pai reditor. Do not include paymen payments to an attorney for the	ts for domestic support oblig				
	_		* Subject	to adjustmen	t on 4/01/19 and every 3 years	s after that for cases filed on	or after the date of	adjustment		
	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?									
			No.	Go to line 7						
			□ Yes	include pay	each creditor to whom you pai ments for domestic support ol r this bankruptcy case.					
	Cre	editor'	s Name an	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for	

De	ebtor 1 Rose C.C. Cabalo		Cas	e number (if known)					
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general prof which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any gent control, or owner of 20% (neral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a general p ny managing agei	artner; corporation nt, including one fo			
	■ No								
	☐ Yes. List all payments to an insider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	s payment			
8.	insider?	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.							
	■ No □ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi				
	rt 4: Identify Legal Actions, Repossessio		pu.u.		morado ordano.	o manno			
	□ No ■ Yes. Fill in the details.				0				
	Case title Case number	Nature of the case	Court or agency		Status of the case				
	Maui Collection Service, Inc. vs. Myron K. Keahi, Jr. and Rose Cabalo 2RC17-1-001588	Assumpsit	District Court of the Second Circuit Wailuku Division		☐ Pending ☐ On appeal ■ Concluded				
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, f	oreclosed, garnis	shed, attached, s	eized, or levied?			
	No. Go to line 11.Yes. Fill in the information below.								
	Creditor Name and Address	, ,		Date		Value of the property			
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed			nancial institution	n, set off any amo	ounts from your			
	■ No □ Yes. Fill in the details.								
	Creditor Name and Address	Describe the action the creditor took Date			action was	Amount			

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

■ No

☐ Yes

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.									
	Inclu	No	dy list	ted on this statemen	i.					
		Yes. Fill in the details.								
	Person Who Received Transfer Address			Description and value of property transferred		paym	Describe any property or payments received or debts paid in exchange		Date transfer was nade	
	Per	rson's relationship to you					· ·			
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No									
	Yes. Fill in the details.									
	Na	Name of trust Description and value of the property transferred Date Transfer of made								
Dar	t 8:	List of Certain Financial Accounts, In	etrur	ments Safe Denosi	t Roves and S	Storage Unit	te.			
Гаг	ι ο.	List of Certain Financial Accounts, in	isti ui	nents, sale beposi	t boxes, and s	otorage office	.5			
20.		hin 1 year before you filed for bankrupto	cy, w	ere any financial ac	counts or inst	ruments he	eld in your name, or for y	your	benefit, closed,	
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.									
		No								
		Yes. Fill in the details.								
				ast 4 digits of Type of account of count number instrument		ount or	t or Date account was closed, sold, moved, or transferred		Last balance before closing or transfer	
21.		you now have, or did you have within 1 h, or other valuables?	year	before you filed for	r bankruptcy, a	any safe de	posit box or other depo	sito	ry for securities,	
		No								
		Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)			Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	escribe the contents		Do you still have it?	
22.	Hav	e you stored property in a storage unit	or pla	ace other than you	home within	1 year befo	re you filed for bankrupt	tcy?		
		No								
		Yes. Fill in the details.								
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents		Do you still have it?	
		_		,						
Par	t 9:	Identify Property You Hold or Control	l for S	Someone Else						
23.		you hold or control any property that so someone.	omeo	ne else owns? Incl	ude any prope	rty you bor	rowed from, are storing	for,	or hold in trust	
		No Yes. Fill in the details.								
		rner's Name dress (Number, Street, City, State and ZIP Code)		Where is the prop (Number, Street, City, S Code)		Describe	the property		Value	
Par	art 10: Give Details About Environmental Information									

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. П Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Court or agency Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Describe the nature of the business

Name of accountant or bookkeeper

No

Business Name

Address

Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

Name
Address
(Number, Street, City, State and ZIP Code)

Date Issued

Yes. Check all that apply above and fill in the details below for each business.

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6

Employer Identification number

Dates business existed

Do not include Social Security number or ITIN.

Debto	Rose C.C. Cabalo	Case number (if known)
with a		king a false statement, concealing property, or obtaining money or property by fraud in connection up to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Ro	ose C.C. Cabalo	
	C.C. Cabalo ture of Debtor 1	Signature of Debtor 2
Date	March 16, 2018	Date
Did yo	u attach additional pages to Your S	tatement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No		
□ Yes		
Did yo	u pay or agree to pay someone who	is not an attorney to help you fill out bankruptcy forms?
No		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your o	·360:			
Debtor 1	Rose C.C. Cabalo	asc.			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF HA	WAII		
Case number					
(if known)					☐ Check if this is an
					amended filing
0" : 15	400				
Official Fo					
Stateme	nt of Intention	<u>n tor Indiv</u>	viduals Filing Under Ch	iapter /	12/15
If you are an ind	ividual filing under chap	ter 7, you must fil	I out this form if:		
creditors hav	e claims secured by you	ır property, or			
	sed personal property ar		ot expired. you file your bankruptcy petition or by the	a date set for th	e meeting of creditors
	ever is earlier, unless the		e time for cause. You must also send copi		
	eople are filing together nd date the form.	in a joint case, bo	oth are equally responsible for supplying c	orrect informat	ion. Both debtors must
	and accurate as possibl our name and case num		s needed, attach a separate sheet to this fo	orm. On the top	of any additional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims			
			: Creditors Who Have Claims Secured by	Branarty (Offici	al Form 106D) fill in the
information be	elow.		•		,
identity the cr	editor and the property th	at is collateral	What do you intend to do with the prop- secures a debt?		Did you claim the property as exempt on Schedule C?
Creditor's S	Southern Cascades Fi	nance	☐ Surrender the property.		□ No
name:			Retain the property and redeem it.		Yes
Description of	2001 Honda Accord	k	Retain the property and enter into a Reaffirmation Agreement.	_	- 163
property securing debt:			☐ Retain the property and [explain]:		
occurring debt.	•				
	our Unexpired Personal		in Schedule G: Executory Contracts and I	Inovnirod Loss	os (Official Form 106G) fill
in the information	on below. Do not list real	l estate leases. Un	nexpired leases are leases that are still in each trustee does not assume it. 11 U.S.C. §	effect; the lease	
Tou may assum	e an unexpireu personai	property lease in	the trustee does not assume it. 11 0.3.0. §		
Describe your u	unexpired personal prop	erty leases		Will th	ne lease be assumed?
Lessor's name:				□ No)
Description of lea	ased			☐ Ye	es
Logopulo vicini				_	
Lessor's name: Description of le	ased			□ No)
Property:				☐ Ye	es .
Lessor's name:				□ No)
Official Form 108		Statement of In	ntention for Individuals Filing Under Chapt	er 7	page 1

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Best Case Bankruptcy

Deb	tor 1	Rose C.C. Cabalo	Case number (if known)	
	cription perty:	n of leased		☐ Yes
Lessor's name: Description of leased Property:				□ No □ Yes
Lessor's name: Description of leased Property:				□ No □ Yes
Des	sor's na cription perty:	ame: n of leased		□ No □ Yes
Des	sor's na cription perty:	ame: n of leased		□ No □ Yes
Und prop	er pen	at is subject to an unexpired lea		ures a debt and any personal
X	Rose	ose C.C. Cabalo c C.C. Cabalo ture of Debtor 1	XSignature of Debtor 2	
	Date	March 16, 2018	Date	

E01 :	a this information to identify your again					
FIII II	n this information to identify your case:			eck one box only as 2A-1Supp:	s directed in this form an	d in Form
Deb	tor 1 Rose C.C. Cabalo			za roupp.		
1	tor 2		'	1. There is no pr	esumption of abuse	
Unit	ed States Bankruptcy Court for the: District of Hawaii				n to determine if a presu	•
					e made under <i>Chapter 7</i> Official Form 122A-2).	Means Test
(if kno	e number 		— ,	`	est does not apply now b	occupe of
,					ary service but it could a	
				☐ Check if this is	an amended filing	
Off	icial Form 122A - 1				an amended imig	
	apter 7 Statement of Your Cur	ront Mar	athly lno	omo		40/45
CII	apter 7 Statement of Your Cur	Tent Moi	itiliy ilic	ome		12/15
attacl case qualif	complete and accurate as possible. If two married people at a separate sheet to this form. Include the line number to winumber (if known). If you believe that you are exempted from the sying military service, complete and file Statement of Exempted 2.	nich the addition a presumption	nal information a of abuse becau	applies. On the top of se you do not have p	f any additional pages, wri primarily consumer debts	ite your name and or because of
Part	·					
1.	What is your marital and filing status? Check one onl	y.				
	Not married. Fill out Column A, lines 2-11.					
	Married and your spouse is filing with you. Fill our			2-11.		
	Married and your spouse is NOT filing with you.	•	•			
	☐ Living in the same household and are not legal	• •		•		
	☐ Living separately or are legally separated. Fill openalty of perjury that you and your spouse are le living apart for reasons that do not include evading	gally separated	l under nonban	kruptcy law that ap	olies or that you and you	
	Il in the average monthly income that you received from all s					
th	01(10A). For example, if you are filing on September 15, the 6-mole 6 months, add the income for all 6 months and divide the total I souses own the same rental property, put the income from that pr	by 6. Fill in the res	sult. Do not includ	de any income amount	more than once. For example	ple, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	ind commissio	ons (before all	\$ 4,935.00	\$	
3.	Alimony and maintenance payments. Do not include proclumn B is filled in.	payments from	a spouse if	\$ 0.00	\$	
4.	All amounts from any source which are regularly partial of you or your dependents, including child support. It from an unmarried partner, members of your household, and roommates. Include regular contributions from a spetilled in. Do not include payments you listed on line 3.	Include regular your depender	contributions nts, parents,	\$0.00		
5.	Net income from operating a business, profession, o					
			tor 1			
	Gross receipts (before all deductions)	\$ 0.00 -\$ 0.00				
	Ordinary and necessary operating expenses	0.00	Copy here ->	\$ 0.00	\$	
6	Net monthly income from a business, profession, or farm Net income from rental and other real property	15	Copy note >	<u> </u>	Ψ	
6.	Net income from rental and other real property	Deb	tor 1			
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$ 0.00				
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	_	
7.	Interest, dividends, and royalties			\$ 0.00	\$	

			Column A Debtor 1		Column B Debtor 2 or non-filing sp	pouse
8. Unemployment compensation			\$	0.00	\$	
Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	nt received was a bene	fit under				
For you	\$ 0	.00				
. ,	\$					
 Pension or retirement income. Do not include any a benefit under the Social Security Act. 			\$	0.00	\$	
10. Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against he domestic terrorism. If necessary, list other sources on total below.	Security Act or paymer umanity, or international	nts Il or				
•			\$	0.00	\$	
Total amounts from concrete pages if any			\$	0.00	\$	
Total amounts from separate pages, if any.		+	»	0.00	\$	
 Calculate your total current monthly income. Add I each column. Then add the total for Column A to the t 		\$	4,935.00	+ \$		= \$ 4,935.00
						Total current monthly
Part 2: Determine Whether the Means Test Applies	to You					income
12. Calculate your current monthly income for the year	r. Follow these steps:					
12a. Copy your total current monthly income from line	11		Сору	line 11 h	ere=>	\$4,935.00
Multiply by 12 (the number of months in a year)						x 12
12b. The result is your annual income for this part of the	he form				12b.	\$59,220.00
13. Calculate the median family income that applies to	you. Follow these ste	ps:				
Fill in the state in which you live.	Н					
Fill in the number of people in your household.	2					
Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the ban	o online using the link s	pecified	in the separa	te instruct	13. ions	\$72,867.00
14. How do the lines compare?						
14a. Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, cl	heck box	1, There is n	o presum	ption of abuse.).
14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	2, The pr	esumption of	abuse is d	determined by	Form 122A-2.
Part 3: Sign Below						
By signing here, I declare under penalty of perjur	y that the information of	n this st	atement and i	n any atta	chments is tru	ie and correct.
χ /s/ Rose C.C. Cabalo						
Rose C.C. Cabalo Signature of Debtor 1						
Date March 16, 2018						
MM / DD / YYYY If you checked line 14a, do NOT fill out or file For	rm 122A-2					
If you checked line 14b, fill out Form 122A-2 and						

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy CourtDistrict of Hawaii

compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for ser be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 1,100.00 Prior to the filing of this statement I have received \$ 1,100.00 Balance Due \$ 0.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associonates copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation reaffirmation agreements and applications as needed; preparation and filing of motions pursual 522(f)(2)(A) for avoidance of liens on household goods.	and that vices rendered or to 0 0
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for ser be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 1,100.00 Prior to the filing of this statement I have received \$ 1,100.00 Balance Due \$ 0.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associous of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation reaffirmation agreements and applications as needed; preparation and filing of motions pursual 522(f)(2)(A) for avoidance of liens on household goods.	and that vices rendered or to 0 0
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■ Debtor □ Other (specify): 3. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): 4. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation reaffirmation agreements and applications as needed; preparation and filing of motions pursual 522(f)(2)(A) for avoidance of liens on household goods. 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:	
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	n and filing of
any other adversary proceeding.	m stay actions or
CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation this bankruptcy proceeding.	of the debtor(s) in
March 16, 2018 /s/ Jean Christensen	
Date Jean Christensen Signature of Attorney	
The Law Office of Jean Christensen LLLC	
1253 S. Beretania St. Ste. 1704 Honolulu, HI 96814	
(808) 521-1202 Fax: (877) 524-2114	
jchristensenlaw@gmail.com	
Name of law firm	

United States Bankruptcy Court District of Hawaii

In re	Rose C.C. Cabalo		Case No.	
		Debtor(s)	Chapter	7
	VEK	RIFICATION OF CREDITOR	MATRIX	
	, 22		17211 2 2021	
Γhe abo	ove-named Debtor hereby verifie	s that the attached list of creditors is true and o	correct to the best	of his/her knowledge.
Date:	March 16, 2018	/s/ Rose C.C. Cabalo		
		Rose C.C. Cabalo		

Signature of Debtor

American Express P.O. Box 981537 El Paso, TX 79998

American Express P.O. Box 10396 Des Moines, IA 50306-0396

American Express P.O. Box 360001 Fort Lauderdale, FL 33336-0001

AP Account Services, LLC 9311 San Pedro Avenue, Suite 600 San Antonio, TX 78216

ARS National Services, Inc. P.O. Box 469100 Escondido, CA 92046-9100

Bradford Richard Ing, Esq. The Ing Law Firm 2145 Wells Street, Suite 204 Wailuku, HI 96793

Chex Systems, Inc. Attn: Consumer Relations 7805 Hudson Road, Suite 100 Saint Paul, MN 55125

Credit Collection Service P.O. Box 607 Norwood, MA 02062

Diversified Consultants, Inc. P.O. Box 551268
Jacksonville, FL 32255-1268

ECMC 111 South Washington Ave. Ste 1400 Minneapolis, MN 55401

Hawaiian Electric Company P.O. Box 2750 Honolulu, HI 96840

Maui Collection Service, Inc. 1885 Main St. Ste. 106 Wailuku, HI 96793

Maui Collection Service, Inc. P.O. Box 14 Wailuku, HI 96793

Maui Electric Co. P.O. Box 398 Kahului, HI 96733-6898

Medcah, Inc. 320 Uluniu St. Ste. 5 Kailua, HI 96734

Medcah, Inc. P.O. Box 1187 Kailua, HI 96734-1187

Midwest Fidelity Service 103 S. Main St. Ottawa, KS 66067-2327

Mr. Cooper P.O. Box 619094 Dallas, TX 75261-9741 Myron Keahi, Jr. 107 Opihi Place Wailuku, HI 96793

Nationstar Mortgage Attn: Bankruptcy Notices P.O. Box 619094 Dallas, TX 75261-9741

Nationstar Mortgage LLC 8950 Cypress Waters Blvd Dallas, TX 75063

OneMain P.O. Box 1010 Evansville, IN 47706

OneMain 333 Dairy Road, Suite 1018 Kahului, HI 96732-2413

OneMain Financial 6801 Colwell Blvd Irving, TX 75039

Progressive Insurance P.O. Box 894107 Los Angeles, CA 90189

Sears/CBNA P.O. Box 6282 Sioux Falls, SD 57117-6282

Southern Cascades Finance 150 N. Bartlett St. Ste. 124 Medford, OR 97501 The Progressive Corporation 6300 Wilson Mills Rd. Mayfield Village, OH 44143

Valley Isle Community FCU 160 Paahana St. Kahului, HI 96732

Verizon by American InfoSource LP as agent 4515 N Santa Fe Ave Oklahoma City, OK 73118

Verizon Wireless P.O. Box 26055 Minneapolis, MN 55426

William T. Kinaka, Esq. 24 N. Church St. Ste. 201 Wailuku, HI 96793